

TAUNTON STATE HOSPITAL

ANNUAL REPORT

OF THE

SUPERINTENDENT

TO THE

TRUSTEES

July 1, 1970 - June 30, 1971

TAUNTON STATE HOSPITAL

June 30, 1971

TRUSTEES

<u>NAME</u>	<u>ADDRESS</u>	<u>TERM EXPIRES</u>
Amy M. Robinson Chairman	5 Jefferson Avenue Taunton	1973
Dorothy G. Williams Secretary	43 Ingell Street Taunton	1975
Kenneth Dorn	106 Main Street Brockton	1976
Edward C. Ducey, Jr.	103 Eisenhower Road Swansea	1972
Coleman Lipman	106 Ryan Street New Bedford	1974
Irving L. Pike	30 Vary Street Attleboro	1977
Robert B. Ricketson	6 Edwards Avenue Taunton	1978

TAUNTON STATE HOSPITAL

June 30, 1971

STAFF PHYSICIANS

<u>NAME</u>	<u>TITLE</u>	<u>SERVICE BEGAN</u>
W. Everett Glass, M.D.	Superintendent	Nov. 1, 1948
Paul F. Fletcher, M.D.	Assistant Superintendent	May 16, 1965
Tatsuji Iida, M.D.	Director of Psychiatry	Dec. 8, 1959
Lawrence M. Abrahams, M.D.	Director of Clinical Psychiatry	May 14, 1967
Jaime Matesanz, M.D.	Director of Clinical Psychiatry	June 28, 1967
Enrique Angeles DeJesus, M.D.	Director of Clinical Psychiatry	Mar. 31, 1968
Onofrio F. Tattoli, M.D.	Senior Psychiatrist	Sept. 8, 1959
D. Sreedharan Nair, M.D.	Senior Psychiatrist	Oct. 27, 1969
Michael James B. Mulcahy, M.D.	Senior Psychiatrist	Aug. 2, 1970
Theethaya L. Ittiara, M.D.	Senior Psychiatrist	Jan. 4, 1971
Napoleon Diaz, M.D.	Chief Physician	Aug. 2, 1964
Morris C. Cross, M.D.	Senior Physician	July 18, 1966
Jacinta Catipon, M.D.	Senior Physician	June 16, 1968
A.H.M. Rezaur Rahman, M.D.	Senior Physician	July 1, 1970
Nambi Salgunan, M.D.	Staff Psychiatrist	Sept. 1, 1970
Danis Soyly, M.D.	Staff Psychiatrist	Sept. 8, 1970
Shankant Daji Limaye, M.D.	Staff Psychiatrist	Jan. 4, 1971
Aikarakudy Chevarghese Alias, M.D.	Staff Psychiatrist	Mar. 19, 1971
A. Joseph Kantharaj, M.D.	Assistant Physician	July 6, 1970
Prabhakar B. Kale, M.D.	Assistant Physician	Sept. 4, 1970
Julius Golden, D.M.D.	Dentist	Sept. 9, 1962
Henry A. O'Brien, Jr., D.M.D.	Dentist	Jan. 15, 1967

TAUNTON STATE HOSPITAL

June 30, 1971

DEPARTMENT HEADS

<u>NAME</u>	<u>TITLE</u>	<u>DATE OF APPOINTMENT</u>
John W. Anderson, Jr.	Steward	Jan. 3, 1954
T. Howard Donahue	Treasurer	Nov. 17, 1963
Joseph Cote	Chief Power Plant Engineer	Aug. 19, 1962
Thomas J. Riley	Maintenance Foreman	Jan. 2, 1966
Russell G. Eastman	Head Farmer	Dec. 2, 1946
Elanche Pouliot	Head Housekeeper, M.B. Unit	June 2, 1962
John Doyle	Head Housekeeper, T-PP Unit	Oct. 16, 1941
Barbara Mumford	Head Housekeeper, Cape-Ply. Unit	April 2, 1952
Theresa Loughlin, R.N.	Director of Nurses	Jan. 1, 1971
Carl S. Sawtelle	Supervisor of Social Services	May 7, 1959
Pauline Walker	Head Occupational Therapist	March 3, 1958
Mary R. Parker	Medical Record Librarian	July 1, 1970
Lois Bissonnette	Supervisor of Volunteer Services	Oct. 18, 1970

TAUNTON STATE HOSPITAL

June 30, 1971

STAFF ORGANIZATION

Superintendent	W. Everett Glass, M.D.
Assistant Superintendent	Paul F. Fletcher, M.D.
Director of Psychiatry	Tatsuji Iida, M.D.
Directors of Psychiatric Units:	
Taunton-Fall River	Jaime Matesanz, M.D., Dir. of Clin. Psychiatry
New Bedford	Lawrence M. Abrahams, M.D., Dir. of Clin. Psychiatry
Cape-Plymouth	Enrique A. DeJesus, M.D., Dir. of Clin. Psychiatry
Chief of Medical Service	Napoleon Diaz, M.D.
Director of Rehabilitation Service	Sterling I. Colten, Ed.D.
Executive Committee:	W. Everett Glass, M.D., Supt., Ex Officio Paul F. Fletcher, M.D., Asst. Supt. Tatsuji Iida, M.D., Dir. of Psychiatry Lawrence M. Abrahams, M.D., Dir. of Clin. Psychiatry Enrique A. DeJesus, M.D., Dir. of Clin. Psychiatry Jaime Matesanz, M.D., Dir. of Clin. Psychiatry Napoleon Diaz, M.D., Chief of Medical Service
Tissue Committee:	Napoleon Diaz, M.D., Chief of Medical Service Jacinta Catipon, M.D., Senior Physician A.H.M. Rezaur Rahman, M.D., Senior Physician Blaise J. Centile, M.D., Pathologist
Infection Committee:	Napoleon Diaz, M.D., Chief of Med. Service, Chairman Paul F. Fletcher, M.D., Asst. Supt. Jacinta Catipon, M.D., Senior Physician Theresa Loughlin, R.N., Dir. of Nurses Mary Dubena, R.N., Asst. Dir. of Nurses John Viveiros, Laboratory Technician Joseph Cote, Chief Engineer Eleanor McCarthy, R.N., Chief Supervisor Norma O'Hearne, R.N., Chief Supervisor Mary Davis, R.N., Chief Supervisor Enid Hanna, R.N., Chief Supervisor Irene Duffy, R.N., Instructor Margaret Stevens, R.N., Regional Supervisor Blanche Pouliot, Head Housekeeper, M.B. Unit John Doyle, Head Housekeeper, T-FR Unit Barbara Mumford, Head Housekeeper, Cape-Ply. Unit

TAUNTON STATE HOSPITAL

June 30, 1971

STAFF ORGANIZATION (Continued)

## Pharmacy Committee:

Paul F. Fletcher, M.D., Asst. Supt.  
 Tatsuji Iida, M.D., Director of Psychiatry  
 Napoleon Diaz, M.D., Chief of Medical Service  
 Lawrence M. Abrahams, M.D., Dir. of Clin. Psychiatry  
 Jaime Matesanz, M.D., Dir. of Clin. Psychiatry  
 Enrique A. DeJesus, M.D., Dir. of Clin. Psychiatry  
 Onofrio F. Tattoli, M.D., Sr. Psychiatrist, Chairman  
 Theresa Loughlin, R.N., Dir. of Nurses  
 Mary Dubena, R.N., Asst. Dir. of Nurses  
 Eleanor McCarthy, R.N., Chief Supervisor  
 Norma O'Hearne, R.N., Chief Supervisor  
 George F. Lynch, Pharmacist  
 Linwood Wordell, Pharmacist  
 Robert J. Burnett, Asst. Steward

## Medical Records Committee:

W. Everett Glass, M.D., Superintendent  
 Paul F. Fletcher, M.D., Asst. Superintendent  
 Tatsuji Iida, M.D., Dir. of Psychiatry  
 Jaime Matesanz, M.D., Dir. of Clin. Psychiatry  
 Lawrence M. Abrahams, M.D., Dir. of Clin. Psychiatry  
 Enrique A. DeJesus, M.D., Dir. of Clin. Psychiatry  
 Napoleon Diaz, M.D., Chief of Medical Service  
 Mary R. Parker, Principal Clerk  
 Ethel Dwyer, Sr. Clerk and Stenographer  
 Carl S. Sawtelle, Supervisor of Social Service

## Disaster Committee:

Paul F. Fletcher, M.D., Asst. Superintendent  
 Napoleon Diaz, M.D., Chief of Medical Service  
 Onofrio F. Tattoli, M.D., Senior Psychiatrist  
 Norris Cross, M.D., Senior Physician, Chairman  
 Theresa Loughlin, R.N., Dir. of Nurses  
 Eleanor McCarthy, R.N., Chief Supervisor  
 Norma O'Hearne, R.N., Chief Supervisor  
 Enid Hanna, R.N., Chief Supervisor  
 Mary Davis, R.N., Chief Supervisor  
 Blanche Pouliot, Head Housekeeper, M.B. Unit  
 John Doyle, Head Housekeeper, T-FR Unit  
 Barbara Mumford, Head Housekeeper, Cape-Ply. Unit  
 Robert J. Burnett, Asst. Steward  
 Carl Sawtelle, Supervisor of Social Service  
 Joseph Cote, Chief Engineer

## Utilization Committee:

Paul F. Fletcher, M.D., Asst. Superintendent  
 Tatsuji Iida, M.D., Dir. of Psychiatry  
 Jaime Matesanz, M.D., Dir. of Clin. Psychiatry  
 Napoleon Diaz, M.D., Chief of Medical Service  
 Robert Jarot, Social Work Supervisor  
 Eleanor McCarthy, R.N., Chief Supervisor  
 Mary R. Parker, Medical Record Librarian

TAUNTON STATE HOSPITAL

June 30, 1971

CONSULTANTSChest

John E. Fenton, M.D.  
68 Church Green  
Taunton, Mass. 02780

Dermatology

Julius Picard, M.D.  
245 Cherry Street  
Fall River, Mass. 02720

Gynecology

O. Arthur Nereo, M.D.  
68 Church Green  
Taunton, Mass. 02780

Neurosurgery

Charles A. Fager, M.D.  
605 Commonwealth Avenue  
Boston, Mass. 02215

James L. Poppen, M.D.  
605 Commonwealth Avenue  
Boston, Mass. 02215

Orthopedics

C. Mason Burden, M.D.  
68 Church Green  
Taunton, Mass. 02780

Pathology

Blaise J. Gentile, M.D.  
564 Centre Street  
Jamaica Plain, Mass. 02130

PEENT

Fred R. Blumenthal, M.D.  
129 High Street  
Taunton, Mass. 02780

Internal Medicine

John E. Fenton, M.D.  
68 Church Green  
Taunton, Mass. 02780

Charles E. Hoyer, M.D.  
32 Cedar Street  
Taunton, Mass. 02780

William L. Donahue, M.D.  
68 Church Green  
Taunton, Mass. 02780

TAUNTON STATE HOSPITAL

June 30, 1971

CONSULTANTS (Continued)

Psychiatry

Jose Delgado, M.D.  
111 Washington Street  
North Easton, Mass. 02356

Theodore G. Denton, M.D.  
1030 President Avenue  
Fall River, Mass. 02720

Arnold Robbins, M.D.  
1419 Beacon Street  
Brookline, Mass. 02146

David Landau, M.D.  
350 Beacon Street  
Boston, Mass. 02116

Paul I. Yakovlev, M.D.  
21 Addington Street  
Brookline, Mass. 02146

John Joseph Falvey, M.D.  
65 Holcott Drive  
Attleboro, Mass. 02703

Walter C. Johnson, M.D.  
132 Pine Street  
Hanover, Mass. 02339

Calvert Stein, M.D.  
146 Chestnut Street  
Springfield, Mass. 01103

Salomon Alfie, M.D.  
1011 Veterans Memorial Parkway  
Riverside, R.I. 02915

Public Health

Benjamin Sachs, M.D.  
40 Newbrook Circle  
Newton, Mass. 02167

Roentgenology

Samuel L. Poplack, M.D.  
151 High Street  
Taunton, Mass. 02780



TAUNTON STATE HOSPITAL

June 30, 1971

CONSULTANTS (Continued)Surgery

William H. Bennett, M.D.  
79 Church Green  
Taunton, Mass. 02780

David Couveia, M.D.  
89 Washington Street  
Taunton, Mass. 02780

William H. Swift, M.D.  
141 High Street  
Taunton, Mass. 02780

Theodore R. Thayer, M.D.  
68 Church Green  
Taunton, Mass. 02780

Frederick G. Doran, M.D.  
68 Church Green  
Taunton, Mass. 02780

Anthony N. Elias, M.D.  
148 High Street  
Taunton, Mass. 02780

Armand V. Bolino, M.D.  
35 West Britannia Street  
Taunton, Mass. 02780

Walter H. Johnson, M.D.  
125 High Street  
Taunton, Mass. 02780

Paul F. Kingsbury, M.D.  
140 High Street  
Taunton, Mass. 02780

William C. Donahue, M.D.  
Lakeville Hospital  
Lakeville, Mass. 02346

David Pottier, M.D.  
252 Winthrop Street  
Taunton, Mass. 02780

Honorary

Joseph L. Murphy, M.D.  
23 Cedar Street  
Taunton, Mass. 02780

SUPERINTENDENT'S REPORTTO THE HONORABLE BOARD OF TRUSTEES:

The following is a summary of the activities of the Taunton State Hospital for the fiscal year July 1, 1970 to June 30, 1971:

MOVEMENT OF POPULATION

<u>Census Beginning of Year - July 1, 1970:</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
In Residence	536	645	1181
On Visit	361	445	806
On Escape	6	3	9
On Family Care	0	1	1
Total on Books	903	1094	1997

Admissions - Fiscal Year:

First Admissions	351	305	656
Readmissions	141	185	326
By Transfer	4	4	8
Total Admissions	496	494	990

Admissions by Geographical Unit:

Taunton	108	94	202
Fall River	22	25	50
New Bedford	140	159	299
Cape	148	137	285
Plymouth	72	79	151
Total Admissions by Geographical Unit	496	494	990

Discharges:

Discharged Outright	115	79	194
Transfers	19	18	37
From Trial Visit	331	412	743
From Absence	5	16	21
From Escape	10	1	11
Deported	0	1	1
Total Discharges	480	527	1007

Census End of Year - June 30, 1971:

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Resident	498	548	1046
On Visit	362	441	803
On Escape	4	3	7
On Family Care	<u>0</u>	<u>4</u>	<u>4</u>
Total on Books	864	996	1860

Census by Geographical Unit at End of Fiscal Year:

<u>Taunton</u>	- Resident	98	94	192
	On Visit	64	59	123
	On Escape	1	0	1
	On Family Care	<u>0</u>	<u>3</u>	<u>3</u>
	Total Taunton	163	156	319

<u>Fall River</u>	- Resident	127	134	261
	On Visit	19	29	48
	On Escape	0	0	0
	On Family Care	<u>0</u>	<u>0</u>	<u>0</u>
	Total Fall River	146	163	309

<u>New Bedford</u>	- Resident	149	144	293
	On Visit	102	169	271
	On Escape	2	0	2
	On Family Care	<u>0</u>	<u>1</u>	<u>1</u>
	Total New Bedford	253	314	567

<u>Cape</u>	- Resident	91	134	225
	On Visit	123	122	245
	On Escape	0	2	2
	On Family Care	<u>0</u>	<u>0</u>	<u>0</u>
	Total Cape	214	258	472

<u>Plymouth</u>	- Resident	33	42	75
	On Visit	54	62	116
	On Escape	1	1	2
	On Family Care	<u>0</u>	<u>0</u>	<u>0</u>
	Total Plymouth	88	105	193

<u>Discharges by Geographical Unit:</u>		<u>Male</u>	<u>Female</u>	<u>Total</u>
<u>Taunton</u>	- Discharged Outright	24	20	44
	By Transfer	3	0	3
	From Trial Visit	50	68	118
	From Escape	1	0	1
	From Absence	4	15	19
	Deported	0	0	0
Total Discharges - Taunton		82	103	185
<u>Fall River</u>	- Discharged Outright	12	5	17
	By Transfer	0	1	1
	From Trial Visit	57	59	116
	From Escape	2	0	2
	From Absence	0	0	0
	Deported	0	0	0
Total Discharges - Fall River		71	65	136
<u>New Bedford</u>	- Discharged Outright	35	18	53
	By Transfer	3	1	4
	From Trial Visit	101	142	243
	From Escape	2	1	3
	From Absence	1	0	1
	Deported	0	0	0
Total Discharges - New Bedford		142	162	304
<u>Cape</u>	- Discharged Outright	29	26	55
	By Transfer	11	15	26
	From Trial Visit	91	113	204
	From Escape	4	0	4
	From Absence	0	1	1
	Deported	0	1	1
Total Discharges - Cape		135	156	291
<u>Plymouth</u>	- Discharged Outright	15	10	25
	By Transfer	2	1	3
	From Trial Visit	32	30	62
	From Escape	1	0	1
	From Absence	0	0	0
	Deported	0	0	0
Total Discharges - Plymouth		50	41	91
<u>Deaths:</u>	Total for Fiscal Year	55	65	120
<u>Deaths by Geographical Unit:</u>				
	Taunton	13	4	17
	Fall River	18	17	35
	New Bedford	11	26	37
	Cape	7	9	16
	Plymouth	5	9	14
Total Deaths by Geographical Unit		54	65	119

ANALYSIS OF MOVEMENT OF POPULATION

This 117th year of the hospital saw a total admission of 990 patients. This is 4 more than the preceding year. Of these there were 6 less first admissions and 6 more readmissions, and transfers to us were 4 more than in the previous year. Readmissions represent 33.7% of total admissions. This figure is surprisingly constant only the past few years, varying from 32 to 34%. At the end of the year there were 803 cases on trial visit, or 3 less than at the beginning. Total patients on the books decreased by 137 and the inresident population at the end of the year was 135 less. This represents an 11% decrease in one year. Deaths were 120, or 22 less than last year.

Admissions by Unit shows some significant changes:

Taunton-Fall River had 65 less	or	255
New Bedford had 11 less	or	299
Cape-Plymouth had 80 more	or	436

The change in the Taunton-Fall River Unit is due to the increased use of the Corrigan Mental Health Center. The increase for the Cape may represent an increase in the "at risk" population - retirees and younger people.

The resident population of each unit shows at the end of the year these comparative figures:

	<u>1970</u>	<u>1971</u>	<u>% of Change</u> <u>+ or -</u>
Taunton-Fall River	493	453	8.1-
New Bedford	329	293	10.9-
Cape-Plymouth	359	300	16.4-

ANALYSIS OF SERVICESTOTAL OUTPATIENT DEPARTMENT VISITS

			<u>Male</u>	<u>Female</u>	<u>Total</u>
After-Care			561	1051	1612
Day Hospital			263	2179	2442
Outpatient	<u>Former Inpatients</u>	<u>Not Former Inpatients</u>			
	<u>M.</u> <u>F.</u> <u>T.</u>	<u>M.</u> <u>F.</u> <u>T.</u>			
	312   581   893	271   540   811	583	1121	1704

MEDICARE - MEDEX (BLUE CROSS EXTENSION)

Claims Submitted	330
Claims Approved	285
Cash Received	\$98,408.34

MEDICAL ASSISTANCE

Patients Approved as of July 1, 1970		352	
Number approved during the year		<u>+123</u>	
		475	
Approved Cases Closed - Reason:			
	Nursing Home	63	
	Excess Assets	7	
	Death	84	
	Discharge	7	
	Trial Visit	31	
	Home	8	
	Convent	1	
	Hospitals	<u>0</u>	
		-209	
TOTAL APPROVED CASES - June 30, 1971			266
In-Patients not approved for M.A.:		40	
Applications at D.H. June 30, 1971		29	
Applications at DPW June 30, 1971		<u>27</u>	<u>+96</u>
TOTAL Number of Patients 65 & Over			362
<u>INITIAL SUMMARIES:</u>			
Due as of July 1, 1970	24		
Approvals for year	<u>+123</u>		
	147		
Initial Summaries mailed 7/1/70 to 6/30/71	<u>- 56</u>	91	
Approved died, discharge, trial visit before summary done		<u>-84</u>	
Initial Summaries due June 30, 1971		7	
Continuous quarterly reviews mailed from 7/1/70 to 6/30/71			687
Total Collected	\$2,025,879.97		

MEDICAL SERVICE

The Medical Service admitted 519 cases, discharged 434 and there were 120 deaths. There were 19 autopsies, representing 16% of the deaths. The average stay on the Medical Service was 21 days. The following table shows the use of consultants during the year:

CONSULTANTSNo. of patients seen:

	<u>Consultations</u>	<u>Operations</u>	<u>Clinical Sessions</u>
Surgeons (4)	12	5	3 (10 patients)
Gynecologists (2)	5		
Orthopedist (2)	7	24	19 (76 patients)
Urologist (1)	1	2	
Dermatologist (1)		1	27 (267 patients)
EEG (1)	1	2	38 (156 patients)
Neurologist (1)	0	0	8 Neurological Conference (8 patients)
Pathologist (1)			
	19 Autopsies		
	1 Path. Conference		
	1 Tissue Report		
	2 Pap Smears		

There were no EEG's done. The Physiotherapy Department gave 5112 treatments to 424 patients. The Laboratory performed 29,231 tests or 5,639 more than last year. The X-ray Department saw 3,350 patients, took 849 EKG's and took 1,070 photographs. 28 patients were operated on in the operating room. The Dental Department had 2,943 visits and 9,691 operations.

Activities of the various committees organized in the staff are summarized as follows:

EXECUTIVE COMMITTEE

Much time was spent discussing problems relating to patient care. The following topics were discussed in some detail:

1. Care of patients in restraints.
2. Recommendations of the Joint Commission on Accreditation of Hospitals following their inspection and their implementation.
3. Applications of new physicians to the staff.
4. Obstetrical care of our patients at Morton Hospital.
5. The assignment of Section 100 cases within the hospital and the Section 100 Report to the Court.
6. The Alcohol Program.
7. The residency agreement form.
8. The reorganization of patients and medical coverage in the Coss Building.
9. The obtaining of an anesthesiologist.
10. Screening of geriatric patients by the Dr. John C. Corrigan Mental Health Center, Fall River.
11. Criteria for starting salaries for Taunton State Hospital physicians.
12. The TB detection program.
13. The use of two attendant blocks to employ 4 patients.
14. The scheduling of patient meetings so as not to interfere with their work assignments.
15. The Rehabilitation program.
16. The Half-Way House in Taunton.
17. The relationship of Dr. Colten to the Executive Committee.
18. Self medication for certain patients.
19. The Rehab Services Unit Handbook.
20. The elopement of Section 86 patients.
21. Population reduction of Taunton State Hospital by 500 patients and the screening of all patients.
22. Nursing coverage on Rehab after office hours and on weekends.
23. Weekly evening meetings at Taunton State Hospital for alcoholics released from the Alcohol Program.
24. Roles of social workers and RNs in patient population reduction.
25. Resuscitation bags for ECT use.
26. Lithium determinations in our laboratory and policy regarding pre lithium workup for outpatients.
27. Statistics on post operative care at Taunton State Hospital.
28. 8-hour, 7-day per week structured program for the acute services.
29. Suicide precautions.
30. Request for a second social worker for the New Bedford Unit.
31. Patient Government and the therapeutic community.
32. The Quarter-Way House on EC-3.
33. Cooperative apartments for patients.
34. The procedure for patients with fractures.
35. Family Care.
36. The Intensive Care Unit.
37. The Volunteer Program.
38. Housing for Taunton State Hospital physicians.
39. The payment for surgery done at Boston State Hospital.
40. Obtaining shock machines for behavior therapy and new ECT machines.
41. Revision of our Utilization Review plan.
42. Possibility of a Surgical and GYN Prevention Clinic at Taunton State Hospital staffed by Boston State-affiliated M.D.s.
43. Hospital Self Inspection for September 1971.
44. Policy on walk-in referrals to the Outpatient Clinic.
45. Possibility of obtaining VISTA Volunteers for work in Taunton State Hospital and the areas we serve.
46. The Recreation Therapy Program.
47. Revision of Medication policy.



48. An Examination System for psychiatric resident physicians at Taunton State Hospital.
49. Admission policy.
50. Obtaining bell boys (communication devices) and augmenting the intercom system.
51. The taking and reading of EEG's.
52. The allocation of working time by Outpatient personnel.
53. Regulations regarding operation of motor vehicles and parking on the Taunton State Hospital Grounds.
54. The BMDD applications and fees.

#### DISASTER COMMITTEE

Meetings were held regularly and matters discussed as various aspects of disaster problems were brought up by the respective department heads.

One of the important matters was the fact that some disaster supplies were improperly stored and some were potentially lethal if misappropriated by patients. Arrangements for more safe storage of these materials were discussed.

The matter of an alarm system was referred to the committee. It was felt that our present system could be revised. For the present a signal of "53" rings, and will be continued until changes can be made. Since grounds people and garage personnel do not have easily accessible bells it was thought that an outdoor siren might be employed. The matter was tabled for future discussion.

Various matters pertaining to "Casualty Flow Chart for Triage" were mentioned. Individual department requirements were made up by the respective department heads. It was mentioned that local civil defense officials will be contacted with the idea of obtaining their views and cooperation regarding possible, and types, of disasters.

#### UTILIZATION REVIEW COMMITTEE

The Utilization Review Committee is composed of the Assistant Superintendent, Chief Medical Geriatrics, social worker, Chief Medical Geriatrics nurse, Chief of the Medical Service, Clinical Directors and Medical Record Librarian. Meetings are held monthly to review care and treatment of patients on Medicare. There were a total of 330 cases reviewed.

#### INFECTION COMMITTEE

Monthly laboratory reports of infections were discussed and recommendations made at each meeting. There were seven meetings held during the year. Discussions were held on the recommendations of the Accreditation Commission. A schedule was set up for yearly chest X-ray, serology, hand and stool examination for all kitchen employees. This schedule was set up for laboratory and X-ray departments to carry out recommendations of Commission. It was reported on October 27, 1970 that all X-rays and laboratory work had been completed. Several discussions were held on the inspection of kitchens at regular intervals as was recommended by the Department of Public Health. In the month of October plans were made for the A.T.B. Detection Program which had been proposed for this institution by the Department of Mental Health. Several meetings were held on this with much discussion and planning and a Mantoux Program was adopted starting March 1, 1971. There has been no incidence of infection approaching epidemic proportions during the fiscal year.

INFECTIONS PER MONTH FOR FISCAL YEAR

July 1970	50
August 1970	55
September 1970	34
October 1970	35
November 1970	34
December 1970	48
January 1971	30
February 1971	24
March 1971	32
April 1971	37
May 1971	33
June 1971	27

TYPES OF INFECTIONS DURING FISCAL YEAR

Hemolytic Staph	88
Non Hemolytic Staph	6
E, Coli	65
Proteus	77
Klebsiella Aerobacter	17
Alpha Hemolytic Strep	7
Beta Hemolytic Strep	20
Beta Hemolytic Strep -	
Group A	24
Aerobacter	92
Pseudomonas	34
Weisseria	5
Providence Group	1
Pneumococci	3

TISSUE COMMITTEE

During the past fiscal year there were 4 diagnostic biopsies. There were no disagreements and it was felt that surgery was justified in all cases.

PHARMACY AND THERAPEUTICS COMMITTEE

This committee held 14 meetings during the year. Of particular interest was discussion of Emergency Kits for all wards and the securing and stocking of these kits which was subsequently accomplished. Another item taken up was a list of Medications considered to be dangerous and necessary to keep under tight control. This is being accomplished by the purchasing of Drug Scanner Trays. As the system is instituted, each ward will requisition enough of the "Control Drugs" to bring their count up to a previously agreed-upon amount. In addition to the regular drug requisitions, a separate form showing the name of the drug, to whom it was given, by whom, etc., will be turned in to the Pharmacy, as well as the drug requisitions. A system of self-medication for some patients was devised. However, it met only with partial success because there were only a few areas where patients could safely keep their bottles. P.D.R.s for all Treatment Rooms will be obtained to meet the requirements of the Board of Accreditation.

INDUSTRIAL ACCIDENTS

Following is information concerning Industrial Accidents reported during the fiscal year:

Total Number Industrial Accidents Reported 156

Type of Accident

Abrasions, contusions, bruises and soreness	87
Back	12
Bites	5
Burns	2
Cuts, lacerations	14
Eye	5
Fractures	3
Kicks	9
Puncture wounds	2
Scratch	6
Sprain	7
Strain	4

Time lost during above period: 798 working days

NURSING DEPARTMENT

The Nursing Department has continued to establish programs both in hospital and in community for the improvement of patient care services.

In the New Bedford Unit four (4) head nurses are holding evening group meetings in the city of New Bedford with discharged patients. Three (3) nurses are providing supportive after-care for individual patients (approximately 24). In addition to their community services, the head nurses become involved with many telephone consultations with discharged patients and are succeeding in maintaining the patients in the community. In the Cape and Taunton-Fall River Units some nurses are doing after-care. One supervisor has been involved as a regular team member and treatment person at the Middleboro-Lakeville Mental Health Clinic. Another supervisor has become the liaison nurse to the John C. Corrigan Mental Health Center.

In September the Director of Nurses, Miss Hectorette M.L. Moreau, R.N., M.A., resigned. Pending the appointment of a permanent Director, an Assistant Director of Nurses had been temporarily appointed until the position was filled retroactive to January by Mrs. Theresa Loughlin, R.N.

The mandate to reduce the in-hospital population by 500 residents has resulted in a Population Reduction Committee which meets monthly, as well as a Subcommittee designed to develop a placement model.

Inservice Education

The goal of developing meaningful staff development programs was undertaken. The nursing staff has been encouraged to participate in workshops, conferences and seminars away from the hospital.

Affiliate Students

Union Hospital, Truesdale Hospital and St. Anne's Hospital have merged to form the Fall River Diploma School of Nursing and will continue to use our facility. Sr. Thomas More will direct the program and Miss Jean Kennedy, R.N., M.A., will assist her.

Mercy Hospital, Springfield, will continue to use this agency through fiscal year 1973 when their school will phase out. Their faculty person is Mrs. Sandra Walton, R.N.

Miss Thomas and Mrs. Anzevino from Bristol Community College met with Dr. Glass and the Acting Director of Nursing to discuss their program. They wish to continue their affiliation with us and we are delighted to continue the relationship.

REHABILITATION SERVICES

Rehabilitation Services' involvement with the Boston University Rehabilitation Counselor Training Program was expanded appreciably.

The most significant development the past year was in relation to research activities. The Director, in completing his doctorate, research "Dependency in Institutionalized Schizophrenics". Another project was completed by a doctoral student from Boston University which explored the characteristics of working patients as related to their rehabilitation potential. By the end of the year Rehabilitation Services had developed with a local builder an agreement whereby two cooperative group living apartments were to be opened.

Rehabilitation Services undertook the development of Family Care placements for the hospital and did secure five homes for eleven patients by the end of the year.

Noting the need for appropriate social activity during the evening hours, Rehabilitation Services initiated a limited Social Club.

The responsibility for publication of the Taunton State Hospital newsletter (The Bulletin) was assumed by Rehabilitation Services.

A separate Rehabilitation Unit was developed in the last half of the year. Doctors are assigned to the Rehabilitation Unit on a consulting basis from each of the three main Units.

The Central Work Coordination Office was fully established and became an accepted and functional part of the hospital.

Future Goals

The main goal for the next year is to continue the development of Rehabilitation Services in the direction of community involvement.

OCCUPATIONAL THERAPY DEPARTMENT

Film strips, slides, TV are used at intervals for group programs relating to home economics, family relationships and social problems; tape recorders for music and other groups.

Trips into the community to stimulate an interest or in preparation for leaving the hospital have included a visit to an Art Exhibit, a visit and tour of a local industry, tours to include revisiting the community and providing the opportunity to shop at large shopping centers and to dine in a restaurant.

Geriatric patients were involved in a cookout that included their participation in food preparation, cooking, serving and in setting up the area for the program.

Providing music for the hospital religious services is now the responsibility of patients who have been trained by the music therapist.

In collaboration with the department of Volunteer Services the annual hospital "Family Day" program was changed to enhance the concept of unitization and extension of the community into the hospital.

### Statistics

Referred patients reached in all units	586
Average number patients reached in group programs in all units	232
Total number patients reached during year	

### VOLUNTEER SERVICE

#### Statistics

	<u>In-Service Volunteers</u>	<u>Hours</u>	<u>Visits</u>	<u>Groups</u>	<u>Participants</u>	<u>Hours</u>
November	10	137	36	5	151	628
December	14	204	31	12	224	896
*January	40	670	270	13	293	1172
February	55	800	286	12	350	1400
March	40	810	-	10	131	655
April	33	313	70	8	104	416
May	35	373	68	11	132	396
June	41	477	-	4	70	280

\*All figures approximate until April when new recording system went into effect.

#### I. In-Hospital Projects

a. Training of Volunteer Director - Besides orientation in hospital - attended Volunteer Administration Course at Northeastern University, 2 days a week, February and May.

b. Supervision and coordination of activities of V.S.O., including outside groups who come to the hospital to entertain patients. Hiring of two assistants.

c. Small Volunteer Clothing Store was set up in Chambers basement, using a volunteer and patients as workers, to distribute donated clothing to the patients.

d. Recording of Volunteer Services has been reorganized with a card system which succinctly lists pertinent information on each volunteer, plus his service record.

e. Volunteer Recruitment - We have spoken to about 6 groups plus recruitment in the Bridgewater and Cape Cod Colleges, Taunton High School and Progeny Youth Group which has been extremely active.

f. Family Day Parade - Community Extension Festivals instituted to better involve the community. Parade was the biggest ever with 56 units.



g. Legal and technical arrangements are being made to involve VISTA Volunteers in helping to depopulate the hospital.

## II. Community Projects

a. Work with Chambers of Commerce - We have worked closely with Fall River, Plymouth and Taunton and have contacts with Cape Cod, Falmouth and New Bedford.

b. Volunteer Advisory Committees - Committees have been set up in Plymouth, Upper Cape, Middle Cape, New Bedford and Fall River, although the latter is now inactive due to the loss of the volunteer coordinator at the Corrigan Mental Health Clinic.

c. Publicity - Articles have been written for papers throughout Region VII and in the Department of Mental Health Newsletter. News releases have been broadcast from radio stations WPEP and WRLI in Taunton and WBSM radio and WTEV television in New Bedford. We also made personal appearances on talk shows and interviews on WRLM Taunton, WWLC Orleans and WOCB S. Yarmouth.

d. Close relations have been established with the local Mental Health Centers and Associate Area Directors in each of the five areas, Mental Health Associations where they exist and two of the Area Boards (Cape & Taunton).

e. Relations have been established with several manufacturing and retail firms for regular donations.

## BUSINESS OFFICE

During the past fiscal year the Business Office prepared, handled and processed purchase orders with a value of \$1,065,000.00 for the normal operation of the hospital.

The main kitchen served approximately 1,243,000 meals at a cost of \$390,000.00. The number of miles traveled by cars and trucks at Taunton State Hospital were 335,065 and gallons of gasoline used were 10,556.4.

The following repair projects were done by outside contractors:

1. Protective coating 2 and 3 boilers	\$10,400.00
2. New Vinyl asbestos tile floor	6,105.00
3. Roof repairs	6,707.00
4. Renovate offices - Chambers Building	7,217.00
5. Replace Fire Alarm System	40,850.00
6. Remodel X-ray with new equipment	45,000.00

Family Day was held on June 8 to 12, 1971. The following items were purchased from Canteen funds and consumed by patients, employees and members of the various bands during this period:

600 lbs. Frankforts	\$288.00
3000 lbs. Watermelon	135.00
Soda	900.00
Hot cups	68.40
Crackerjacks	106.40
Paper Plates	106.00
	<u>\$1603.00</u>

The following major equipment was obtained during the year:

1. Ward beds	\$5922.00
2. Mattresses	5917.00
3. Sedan	2488.00
4. Ranch Wagon	2728.00
5. Dump Truck	8713.00
6. Payroll Machine	7221.00
	<hr/>
	\$32989.00 for major equipment
	33661.00 for other equipment
Grand Total	<hr/>
	\$66650.00

In the fiscal year ending 6/30/71 a cost accounting system was introduced by the Central Department. This was completed and worked up by the accounting firm of Jordan and Jordan. The figures are compiled by the department heads at Taunton State Hospital. The final report is completed in the Steward's Office under the supervision of the Steward.

### FIRES

Fire drills were held regularly during the year. The following is a list of fires which occurred during the fiscal year:

- July 15, 1970 - Stuffing inside chair seat was smoldering and burned a hole about four inches in diameter in chair seat.
- August 28, 1970 - A patient detected the odor and smoke but was unable to find the source so he went to the telephone to notify the Engine Room. He found the wall phone and directory were on fire. He extinguished the fire with water and ran over to the Engine Room and notified the Engineer, Mr. William Cote. Mr. Cote responded at once and found the phone and directory completely destroyed. The wall, mopboard and moulding were charred and two floor tiles destroyed.
- October 13, 1970 - A fire of suspicious origin in a mattress. The mattress was made of foam rubber and caused a large amount of smoke. The fire was contained in the room and soon after the fire department arrived it was completely extinguished and the smoke was cleared from the building.
- November 5, 1970 - The fire, of suspicious origin, caused extensive damage to building and equipment.
- November 30, 1970 - During a period of one hour and forty-five minutes three fires were started in leaves and brush in a wooded area of the hospital grounds. The fire scorched an area of fifty square feet and the lower branches of several fir trees.
- January 12, 1971 - The fire took place in a pillow. The fire apparently was started by a carelessly discarded cigarette or match. The fire was quickly smothered by Mrs. Curran. One pillow and a blanket were damaged, also the head of the bed was scorched. The fire was investigated by Mr. Cote, Chief Engineer.
- February 1, 1971 - A discarded cigarette burned a small area of baseboard and moulding. It was extinguished by Mr. Monroe with water. Engine Room personnel checked it out and used an extinguisher to cool the charred area.
- February 12, 1971 - Trash in a trash can was burning.
- April 14, 1971 - Brush fire about fifty feet in diameter.
- June 1, 1971 - Discarded cigarettes and paper were smoldering.
- June 17, 1971 - Fire in patients' room. Both beds in the room were ablaze, the flames destroying the bedding, mattresses and a few pieces of clothing. The walls, floor and ceiling of the room were scorched and have smoke damage.

PSYCHOLOGY DEPARTMENT

The number of psychological examinations given during the fiscal year was 987. 21 lectures were given to student nurses, physicians, etc., during the year. There were 277 therapy sessions. Personnel screening included 500 people. Continuing research in personnel screening, participation in hospital programs for alcoholism, rehabilitation, outpatient, Day Care, Medicare and Medical Assistance. There were 2 hospital tours and lectures to outside groups.

SOCIAL SERVICE

The following are statistics on placement of patients during the fiscal year:

Residential (Own Home)	48
Nursing Home	73
Rest Home	38
Other (Includes Fam. Care, a room, relative, transfer, foster home, etc.)	18
Preplacement Visits	115
Consultation to nursing home and rest home	475
Vocational	1
Home finding and evaluation	55
Cases evaluated	816

CHAPLAINS' DEPARTMENT

The spiritual needs of patients were administered during the year by Rabbi Baruch Korff, Fathers Andre P. Jusseaume and Richard W. Beaulieu and Rev. Harold M. Udell who are on call 24 hours a day throughout the year.

HOUSEKEEPING DEPARTMENT

A new method of color coding the laundry (sheets, towels, etc.) by Unit was devised this year. Each Unit was given its own color.

LIBRARY DEPARTMENT

Community involvement was actualized in the Patients' Library this year in the following instances:

New carpeting purchased for the library lounge by the Volunteer Service Organization. Contributions to the monthly displays and special-interest exhibits by 5 patients, 16 members of the community and 18 employees; complimentary subscriptions of 3 additional area newspapers, to keep our residents in contact with their own community news; the very successful program on wilderness camping arranged by Mrs. Jean Bearse and presented by Mrs. Chester Cross of East Sandwich, after which refreshments were served tearoom-style in the adjacent rotunda; the exceptionally well-attended Art Show. Exhibitors were employees or their relatives who generally loaned beautiful works of art such as one would see in any local art show; donations of books, paperbacks, newspapers, records, textbooks, artificial flowers and ethnic dolls by members of the community, the employees and our residents.



Four Medical Library Book Committee meetings were held to evaluate and select new books and journals for the professional collections. During the year nineteen Interlibrary Loans of professional literature were received from National Library of Medicine (1); Boston College (2); Boston University (1); Brockton V.A. (1), and Countway (14), for members of the professional staffs.

#### FARM

An edict which will result in the closing down of all farm activities for profit by July 1, 1973 was received by this hospital.

#### PSYCHIATRIC SERVICE

Breakdown of cases admitted 7/1/69 to 6/30/70 and evaluated after one full year (See Chart A, Appended) shows that 63 cases were left in the hospital at the end of the year. This represents 6.3%. Of these 63 cases, 34 were first admissions to the hospital at time of admission. There were 54 dead at the end of the year, or 5.4%. On visit or discharged were 868, or 88% of the cases admitted.

Last year was very significant in that no doctors left the hospital at the end of June. This was because of the fact that the hospital has been approved for three year residency training program and we are about to have a full staff. Last year there were training programs for the first and second year residency but it is expected that when the second year residents move up to the third year level, there will be a residency at the third year level. This will make it possible for us to plan to create five units in the future rather than the three units in existence at the present time. We have continued to endeavor to link up the hospital with the community clinics, agencies, and other resources, to develop community psychiatry program in which the hospital exists as a community extension. This will necessitate the extension of the temporary licensure of doctors to cover these community resources.

The Center Building has been condemned as a fire hazard and the Commissioner has issued a mandate to the hospital to reduce the number of residents in the hospital to at the rate of 1 per 1000 general population. A series of meetings have

BREKDOWN OF CASES ADMITTED 7/1/69 - 6/30/70

As of 6/30/71

<u>Admissions:</u>	Male	499
	Female	487
	Total	<u>986</u>

Taunton State Hospital

<u>AREAS</u>	<u>Admissions</u>			<u>Still in Hospital</u>			<u>Still on Trial Visit</u>			<u>Dead</u>			<u>Discharged</u>			<u>Escaped</u>		
	<u>M</u>	<u>F</u>	<u>T</u>	<u>M</u>	<u>F</u>	<u>T</u>	<u>M</u>	<u>F</u>	<u>T</u>	<u>M</u>	<u>F</u>	<u>T</u>	<u>M</u>	<u>F</u>	<u>T</u>	<u>M</u>	<u>F</u>	<u>T</u>
Taunton-Fall River	169	151	320	14	11	25	10	19	29	14	8	22	131	113	244			
	185	171	356	14	8	22	16	23	39	12	7	19	142	133	275	1	0	1
	145	165	310	10	6	16	12	25	37	8	5	13	117	127	244			
Totals	499	487	986	38	25	63	38	67	105	34	20	54	390	373	763	1	0	1

CHART A

been held to achieve this goal and we have succeeded in reducing the population by about 200, so far, but this is still far from our goal. One bottleneck seems to be the fact that Social Service has a special contract with the Department of Mental Health and they are apparently limiting the number of cases to handle in order to provide quality care. Part of the Disability form which is required for Disability Assistance from the Department of Public Welfare has to be completed by Social Service and they have not organized their potential in this endeavor of placing the patient in the community. A group of community nurses has been organized and despite this difficulty, the nurses have continued to serve the patient at the community level. Some patients receive long-acting tranquilizers, injected at the community level every other week, so that they can be kept in the community. While they are in the community they are encouraged to be as productive in the community as possible - according to their own capacity.

We are also making an effort to prepare for the survey by the Joint Commission on Accreditation of Hospitals which will come some time in the future.

The committee system of the Medical Staff has worked well and meetings were held regularly, presided over by the chairman of each committee and minutes were kept for future review and survey.

Last year the Ad Hoc Committee of the Housing Committee was organized to serve the administration of the hospital in an advisory capacity.

Chapter 880, Acts of 1970, regarding new commitment law, will be in effect on November 1, 1971 and the entire staff of the hospital participated in several seminars to study the new law under the guidance of A. Louis McGarry, M.D., Director of Legal Medicine, Department of Mental Health.

(20)  
ALCOHOL PROGRAM

The Alcohol Program was tried only on a Day Care basis starting in March of 1970. Very few patients participated and sometimes no patients. In order to revitalize the Program, it was decided that inpatients who have drinking problems be allowed to participate in the Program again as of October 1, 1970. We are also affiliating with the Alcoholism Family Program in the Plymouth Area which is supported by a Federal grant in collaboration with the Division of Alcoholism, Department of Public Health, to render further service in follow-ups for the patients from the twelve towns in the Plymouth Area.

COMMUNITY EXTENSION

This year has seen a growth of our community extension plans. We will soon divide Psychiatric Service into the five geographical areas that we serve and hope to have, therefore, even smaller units. Our ultimate goal is to have about one bed per 1000 population, or perhaps 600 beds. We also hope, this coming year, to develop under Chapter 888 a more effective way of screening admission of patients. We hope that each clinical director will have close affiliation with his geographical area, perhaps even becoming the area director responsible for his ratio of one bed per 1000 population. This kind of administration under the hospital Superintendent would seem to further the concept of community psychiatry.

The older building with its 400 patients has failed to meet safety requirements and we feel obliged to get most of these patients out into the community.

Many of these will have to be declared eligible for Public Welfare under Disability Assistance. We will develop an expanding follow-up service into each area to try and keep these older and chronic patients out under acceptable conditions.

As in the past, I, as Superintendent of the hospital, am most appreciative of the cooperation from the staff of this hospital. I am sure there is not a more dedicated group of employees anywhere in our state system. The flexibility they have shown in moving into the idea of community psychiatry is most pleasing, and without this willingness and cooperation we would be mired down.

Respectfully submitted,

/s/ W. Everett Glass, M.D.

W. Everett Glass, M.D.  
Superintendent